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**DEPLOYMENT TOOL FOR DISTAL BONE ANCHORS WITH SECONDARY
COMPRESSION**

AS.

08/29/07.

Related Applications

[0001] This application is a continuation-in-part of U.S. Patent Application No. 09/991,367, filed November 13, 2001, which is a continuation-in-part of U.S. Patent No. 6,551,481, issued January 28, 2003 and this application claims the priority benefit under 35 U.S.C. § 119(e) of Provisional Patent Application 60/451,296 filed February 28, 2003 and Provisional Patent Application 60/464,398 filed April 21, 2003, both of which are hereby incorporated by reference in their entirety.

now US Patent 6,840,323, US Patent Application No. 09/924,467, filed August 23, 2001, now

Background

Field of the Invention

[0002] The invention relates in general to the field of bone anchors, and specifically to a deployment device for a bone anchor.

Description of the Related Art

[0003] The femur, otherwise known as the thigh bone, generally comprises an elongate shaft extending from the hip to the knee. The proximal end of the shaft includes a head, a neck, a greater trochanter and a lesser trochanter. The head of the femur fits into the acetabular cup of the hip bone to form a ball and socket joint at the hip. The distal end of the femur includes a medial condyle and a lateral condyle. The condyles engage an upper end of the tibia to form the knee joint. Overall, the femur is the longest and strongest bone in the skeleton. However, portions of the femur are extremely susceptible to fracturing.

[0004] Pertrochanteric fractures among geriatric patients are the most frequent in connection with those of the region of the neck of the bone. The advanced age and the pathologies which are encountered in these patients make a timely stabilization of skeletal injuries necessary in order to reduce to a minimum the bed confinement and the rehabilitation times. Preferably, devices and procedures are utilized which minimize complications brought about by the so-called immobilization syndrome, which may be lethal for patients in delicate metabolical circumstances. It is also preferable to reduce to a minimum blood losses